

Western Claim Service Center P.O. Box 42065 Phoenix, AZ 85080 O (213) 612-0880 F (800) 664-1765

July 19, 2019

Farber & Co 333 Hegenberger Road, Suite 504 Oakland, CA 94621

JUL 2 4 2019

Re: Employee:

Jonathan Shockley

Employer:

Biotelemetry Inc

Date of Injury: 2/15/2019

Policy Number: 000071738154 / 000090

Claim Number: 040519008736

Company:

Chubb Indemnity Insurance Company

To whom it may concern:

In accordance with the Rules of Practice and Procedures of the Workers' Compensation Appeals Board, we submit the following:

- (x) Medicals as follows: All Medicals received from 05/20/19 to 07/19/19.
 - Golden Gate Hand Therapy: 03/27/19, 04/01/19, 04/03/19, 04/08/19, 04/10/19, 04/16/19, 04/17/19, 04/22/19, 04/24/19, 05/03/19, 05/15/19, 05/25/19, 05/29/19.
 - The Hand Center of San Francisco Inc.: 4/16/19, 5/14/19, 5/28/19

Sincerely,

Mario Castro

Mario Castro Claims Examiner

PROOF OF SERVICE 1013A (3) CCP

STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

I am employed in the County of Los Angeles, State of California. I am over the age of 18 and not a party to the within action. My business address is 555 South Flower Street 5th Floor Los Angeles CA. 90071.

On July 19, 2019 I served the foregoing document described as a **covered letter and medical reports**, on the interested parties in this action by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States mail at Los Angeles, California addressed as follows:

Christian Charles Colantoni Colantoni, Collins, Marren, Phillips and Tulk 201 Spear Street Suite 1100 San Francisco, CA 94105

Farber & Co 333 Hegenberger Road, Suite 504 Oakland, CA 94621

Executed on July 19, 2019, in Los Angeles, California.

I declare under penalty of perjury, under the laws of the State of California that the above is true and correct.

Nory Salcedo

Signature Typed or Printed Name

Fax: (415)447-3868

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang. Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 03/27/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand Visit No.: 4

Insurance Name: One Call PT/ Align Networks

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: Pt reports that he hasn't tested the pain as he is limiting all of his activities. He states that he has

minor relief following therapy sessions.

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels, STM bilateral FA flexors/extensors, US 0.5 w/cm2 3 MHz R volar distal FA cont, cupping/graston along FA, red flexbar pro/sup 15x, 1# wrist curls 15x3, reviewed HEP, pt edu on prox strengthening, review of ergo principles.

Assessment/Diagnosis: Weakness in (B) FA's is likely limiting activity tolerance for computer use.

Rehab Potential: Good **Patient Problems:**

Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP I

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Blant Country and Instructions: Progressing Patient Next Visit

45 min tx.

Focus on strengthening proximally & distally

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Daily Note: 04/01/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 5

Date of Original Eval: 03/18/2019 Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Insurance Name: One Call PT/ Align Networks

Subjectively

Treatment Side: Left, Right

Current Complaints / Gains: PT states he has started strengthening at home and he was surprised how heavy a 1# weight felt

for him

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective () For a case a sale sale and a control of the control o

Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels, STM bilateral FA flexors/extensors, red flexbar pro/sup 15x, 1# wrist curls 20x each plane, brown gripper 3rd notch 10x bilaterally, intrinsic strengthening adduction, HEP given for putty strengthening ex

Assessment Assessment

Assessment/Diagnosis: Weakness persists in (B) UE, poor tolerance w/ strengthening ex

Rehab Potential: Good Patient Problems:

- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10 2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Instructions: Progressing Patient Next Visit

45 min tx.

F/U purchasing putty for HEP strengthening

Annie Ting

Annie Ting License #18714

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79,642: Pain in left hand

Date of Daily Note: 04/03/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 6

Insurance Name: One Call PT/ Align Networks

Subjective 1

Treatment Side: Left. Right

Current Complaints / Gains: Pt states he found a putty at home and has been using that for exercises.

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

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Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels, STM bilateral FA flexors/extensors, red flexbar pro/sup 20x, 1# wrist curls 20x each plane, red Tband ER/IR/rows 15x bilateral, bicep curls 5# 15x

Assessments of the first of the second of th

Assessment/Diagnosis: Better tolerance to strengthening

Rehab Potential: Good Patient Problems:

Decreased function and increased pain affecting ability to complete I/ADLs.

- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

2: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks. I

2; (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks. I

Instructions: Progressing Patient Next Visit

45 min tx.

Cont w/ strengthening as tolerated

Annie Ting

Annie Ting License #18714

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 04/08/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 7

Insurance Name: One Call PT/ Align Networks

Subjective Company of the Company of

Treatment Side: Left, Right

Current Complaints / Gains: Pt states he gets flare ups even with the exercises at home. "I ordered these things that I put on my head and it can help me move the mouse and use my phone. It hasn't come in yet. I am surprised at how little I use my phone/computer causes my hands to hurt."

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels, STM bilateral FA flexors/extensors, red flexbar pro/sup 2x20, 1# wrist curls 2x20 each plane, red gripper 5 Kg 10x each plane bilateral, c/p

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Assessment

Assessment/Diagnosis: Low tolerance for strengthening

Rehab Potential: Good Patient Problems:

- Decreased function and increased pain affecting ability to complete I/ADLs.
- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

- 1: (2 Weeks) | 1. Pt will be I with HEP |
- 2: (2 Weeks) | 1. Pt will be I with HEP I

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks. |

2: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Instructions: Progressing Patient Next Visit

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan Date of Birth: 09/27/1978 Document Date: 04/08/2019

45 min tx.

Plan is to cont w/ strengthening as tolerated until the 12th visit and to have minimal computer use -- i.e. no "testing" to see if pt is able to handle more time @ computer.

MD appt is 4/18

Annie Ting

Annie Ting License #18714

Golden Gate Hand Therapy 1700 California St Ste 440 San Francisco, CA 94109-4592

Phone: (415)359-1444 Fax: (415)447-3868

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 04/10/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 8

Insurance Name: One Call PT/ Align Networks

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: "I got the pointers for the computer but it did not work so I am going to return it. I don't think this

condition is psychological at all."

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels, STM bilateral FA flexors/extensors, red flexbar pro/sup 2x20, 1# wrist curls 2x20 each plane, red RB for finger ext 15x, reviewed ergo when at computer

Assessment

Assessment/Diagnosis: Low tolerance for strengthening

Rehab Potential: Good Patient Problems:

- Decreased function and increased pain affecting ability to complete I/ADLs.
- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

- 1: (2 Weeks) [1. Pt will be I with HEP]
- 2: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

- 1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10 2. Pt will understand and implement proper positioning for I/ADLs.
- 3. Pt will increase grip strength bilaterally by 10#
 4. Pt will be able to return to work part time while implementing proper positioning/breaks.
- 2: (6 Weeks) | 1. Pt will decrease pain to 0-1/10
 2. Pt will understand and implement proper positioning for I/ADLs.
 3. Pt will increase grip strength bilaterally by 10#
- 4. Pt will be able to return to work part time while implementing proper positioning/breaks. [

Instructions: Progressing Patient Next Visit

Daily Note / Billing Sheet Patient Name: Shockley, Jonathan Date of Birth: 09/27/1978 Document Date: 04/10/2019

45 min tx.

Plan is to cont w/ strengthening as tolerated until the 12th visit and to have minimal computer use -- i.e. no "testing" to see if pt is able to handle more time @ computer.

MD appt is 4/18

Annie Ting

3

Fax: (415)447-3868

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang. Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 04/15/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand Visit No.: 9

Insurance Name: One Call PT/ Align Networks

Subjective - Taxasa and a subject of the subject of

Treatment Side: Left, Right Current Complaints / Gains: "I just got a new software with a sensor, it has been a great addition but I still get flare up if I do

stuffs, but I feel that I am a little stronger, I am seeing the MD tomorrow"

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective

Objective Findings

MHP/Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels 1x20, STM/cupping to bilateral FA flexors/extensors, green flexbar sup 1x10 red flexbar pro 1x10, 2# wrist curls 2x10 each plane, red gripper 1x10 with FA in neutral, continue discussion of increase work breaks throughout the day with decreased computer use, C/P

Assessment

Assessment/Diagnosis: Pt with low activity tolerance for progressive strengthening ex's. Pt with great progress with stretches but reported continue to have constant diffused pain at B FA and with decreased activity tolerance for functional activities. Pt may benefit from continuing skilled therapy for 1x/wk for 6 wks to inc strength and activity tolerance for work demands and functional ADLs/IADLs.

Rehab Potential: Good **Patient Problems:**

- Decreased function and increased pain affecting ability to complete I/ADLs.
- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

- 1: (2 Weeks) | 1. Pt will be I with HEP |
- 2: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

- 1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10
- 2. Pt will understand and implement proper positioning for I/ADLs.3. Pt will increase grip strength bilaterally by 10#
- 4. Pt will be able to return to work part time while implementing proper positioning/breaks. I
- 2: (6 Weeks) | 1. Pt will decrease pain to 0-1/10
- 2. Pt will understand and implement proper positioning for I/ADLs.
- 3. Pt will increase grip strength bilaterally by 10#
- 4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan Date of Birth: 09/27/1978 Document Date: 04/15/2019

Rian Progressing Patient Next Visit

45 min tx.

97140 manual (1) 15 min 97110 Therex (2) 30 min 97013 Paraffin (1)

Plan is to cont w/ strengthening as tolerated until the 12th visit and to have minimal computer use - i.e. no "testing" to see if pt is able to handle more time @ computer.

MD appt is 4/18

Crystal Wong

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Daily Note / **Billing Sheet** Addendum

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 04/17/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand Visit No.: 10

Insurance Name: One Call PT/ Align Networks

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: "I saw the doctor yesterday and he said no computer use at all"

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels 1x20, STM/IASTM to bilateral FA flexors/extensors, green flexbar sup/pro 1x15, 2# wrist curls 1x15 each plane, brown calibrated gripper 3rd notch 1x15 in all planes continue discussion of increase work breaks throughout the day with decreased computer use. C/P

Assessment

Assessment/Diagnosis: Pt with low activity tolerance for progressive strengthening ex's and required multiple breaks

throughout ex's.

Rehab Potential: Good Patient Problems:

Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10
2. Pt will understand and implement proper positioning for I/ADLs.
3. Pt will increase grip strength bilaterally by 10#
4. Pt will be able to return to work part time while implementing proper positioning/breaks. |

Plan

Instructions: Progressing Patient Next Visit

Daily Note / Billing Sheet Addendum Patient Name: Shockley, Jonathan Date of Birth: 09/27/1978 Document Date: 04/17/2019

45 min tx. 97140 manual (1) 15 min 97110 Therex (2) 30 min 97013 Paraffin (1)

Pt may benefit from continuing skilled therapy for 1x/wk for 6 wks for symptoms mgmt, to increase activity tolerance and strength. If you agree with the plan, please send an updated prescription for workers comp approval at your earliest convenience. Thank you for your referral.

Original Note Completed On: April 17, 2019 3:44pm Addendum Completed On: April 18, 2019 1:04pm

Crystal Wong

Crystal Wong License #19725

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 04/22/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 11

Insurance Name: One Call PT/ Align Networks

Treatment Side: Left, Right

Current Complaints / Gains: "Everyone is about the same"

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Annal Section 19 Control of the Control o

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels 1x20, STM/IASTM to bilateral FA flexors/extensors, green flexbar sup/pro 1x20, 2# wrist curls 1x15 each plane, green calibrated gripper 15kg 1x10 in all planes. C/P

Assessment -

Assessment/Diagnosis: Pt continues to have low activity tolerance for progressive strengthening ex's and required multiple rest breaks throughout. Pt advised to continue with FA stretches, tightness with R extrinsic extensors > L.

Rehab Potential: Good Patient Problems:

- Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks. I

Plan[®]

Instructions: Progressing Patient Next Visit

45 mln tx.

97140 manual (1) 15 min 97110 Therex (2) 30 min 97013 Paraffin (1)

Crystal Wong

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Daily Note: 04/24/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 12

Insurance Name: One Call PT/ Align Networks

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: "Things are about the same, but I know things are feeling better."

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels 1x20, STM/IASTM to bilateral FA flexors/extensors, green flexbar sup/pro 12x, 2# wrist curls 15x each plane, 3rd notch gripping 15x each plane bilateral, hammer 15x pro/sup, gyroball for 20 seconds each hand, C/P

Assessment , ,

Assessment/Diagnosis: Pt needed verbal cues to keep weights close to body when performing wrist curls, as pt tends to extend elbow straight. Pt continues to fatigue easily w/ strengthening ex.

Rehab Potential: Good **Patient Problems:**

Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10 2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Plan

Instructions: Progressing Patient Next Visit

97140 manual (1) 15 min 97110 Therex (2) 30 min 97013 Paraffin (1)

Annie Ting

Annie Ting License #18714

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Daily Note: 05/03/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand Visit No.: 13

Insurance Name: One Call PT/ Align Networks

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Subjective Treatment Side: Left, Right

Current Complaints / Gains: "Things are about the same, but I know things are feeling better."

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA on foam roller, backstrokes and snow angels 1x20, STM/IASTM to bilateral FA flexors/extensors with FA stretches, green flexbar sup/pro 15x, 2# wrist curls 2x15 each plane, true balance for B UE. red gripper 10kg 1x15 with FA in neutral. C/P

Assessment Comment of the second of the seco Assessment/Diagnosis: Pt continues to fatigue easily w/ strengthening ex and continues with B FA extrinsic extensors

tightness L>R.

Rehab Potential: Good Patient Problems:

Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks. I

Plan and a secretarial control of the secretarian secretarians and the secretarian secretarians and the secretarians and the secretarians and the secretarians are secretarians are secretarians are secretarians and the secretarians are secretarians are secretarians are secretarians and the secretarians are secret Instructions: Progressing Patient Next Visit

45 min tx.

97140 manual (1) 15 min 97110 Therex (2) 30 min

97013 Paraffin (1)

Crystal Wong

Golden Gate Hand Therapy 1700 California St Ste 440 San Francisco, CA 94109-4592

Phone: (415)359-1444 Fax: (415)447-3868 Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Keletring Firy storaids J. Lang, Factor of

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 05/15/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand Visit No.: 15

Insurance Name: One Call PT/ Align Networks

Subjective And The Control of the Co

Treatment Side: Left, Right

Current Complaints / Gains: "Things are about the same but my R seems a little more flare up the past two days."

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA. STM to bilateral FA flexors/extensors with FA stretches, green flexbar sup/pro 2x10, hand helper 2 RB 1x15 for L and 1x 15 for R due to pt request of less strain on R side today. 2# wrist curls 2x15 each plane, medium soft putty composite grip 1x10 for B hand. C/P post tx.

Assessment

Assessment/Diagnosis: Pt with poor activity tolerance for progressive strengthening ex's and require multiple rest break to complete ex's, continues to have bilateral FA pain w/ functional use

Rehab Potential: Good Patient Problems:

• Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Instructions: Progressing Patient Next Visit

45 min tx. 3/6 authorized 97140 manual (1) 15 min 97110 Therex (2) 30 min 97013 Paraffin (1)

Crystal Wong

Crystal Wong License #19725 Golden Gate Hand Therapy 1700 California St Ste 440 San Francisco, CA 94109-4592

Phone: (415)359-1444 Fax: (415)447-3868

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Daily Note: 05/22/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 16

Insurance Name: One Call PT/ Align Networks

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: "I tested it this past week and had a flare up especially in my R side after using my phone for half

an hour. I have no idea what I am going to do job-wise, maybe I will become homeless. This is very depressing.

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Objective

Objective Findings

Paraffin to bilateral hands, MHP to bilateral FA, STM to bilateral FA flexors/extensors with cupping, green flexbar sup/pro 2x10, 5# hand gripper 10x each side, C/P post tx

Post-Treatment

Grip L 63# R 72#

Assessment

Assessment/Diagnosis: Pt presents w/ compromised circulation which may be affecting healing process for pt. Noted that after 30 seconds to 1 min of cupping, pt's skin immediately blanched. Typical clinical observation with other patients have shown that skin stays red for the next ~5 minutes at minimum post-cupping

Although pt's grip measurement on R side has gone up since initial vist, pt continues to have poor activity tolerance for progressive strengthening ex's and require multiple rest break to complete ex's. Continues to have bilateral FA pain w/ functional use

Rehab Potential: Good Patient Problems:

Decreased function and increased pain affecting ability to complete I/ADLs.

Short Term Goals:

1: (2 Weeks) | 1. Pt will be I with HEP |

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10

2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

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instructions: Progressing Patient Next Visit

Daily Note / **Billing Sheet**

Patient Name: Shockley, Jonathan

Date of Birth: 09/27/1978

Referring Physician(s): Lang, Patrick MD

Date of Original Eval: 03/18/2019

Treatment Diagnosis: ICD10: M79.641: Pain in right hand,

M79.642: Pain in left hand

Date of Daily Note: 05/29/2019

Injury/Onset/Change of Status Date: 02/15/2019

Diagnosis: ICD10: M79.641: Pain in right hand, M79.642:

Pain in left hand

Visit No.: 17

Insurance Name: One Call PT/ Align Networks

Subjective

Treatment Side: Left, Right

Current Complaints / Gains: "I saw Dr. Lang yesterday and he said this is just going to take a long time. He writesto Workers comp that the condition may not improve for the next 1-2 years and will require a long time to heal"

Home Health Care: No

Mental Status/Cognitive Function Appears Impaired? No

Tx included: Paraffin to bilateral hands, MHP to bilateral FA on foam roller, STM to Objective Findings

bilateral FA flexors/extensors with cupping, green flexbar sup/pro 2x10, 2# wrist in all

planes 2x12, 15kg hand gripper 12x each side, C/P post tx

Post-Treatment Grip

L 63# R 72#

1.3.

Assessment 📑

Assessment/Diagnosis: Pt presents w/ compromised circulation which may be affecting healing process for pt. Pt continues with poor activities tolerance and requires multiple rest breaks when completed strengthening ex's. Pt may benefit from continuing therapy for 1x/wk for 6 wks to increase activity tolerance for strengthening and symptoms mamt.

Rehab Potential: Good **Patient Problems:**

Decreased function and increased pain affecting ability to complete I/ADLs.

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Short Term Goals:

1; (2 Weeks) | 1. Pt will be I with HEP I

Long Term Goals:

1: (6 Weeks) | 1. Pt will decrease pain to 0-1/10 2. Pt will understand and implement proper positioning for I/ADLs.

3. Pt will increase grip strength bilaterally by 10#

4. Pt will be able to return to work part time while implementing proper positioning/breaks.

Instructions: Progressing Patient Next Visit

Daily Note / Billing Sheet

Patient Name: Shockley, Jonathan Date of Birth: 09/27/1978 Document Date: 05/29/2019

45 min tx. 5/6 authorized

97140 manual (2) 30 min 97110 Therex (1) 15 min 97013 Paraffin (1)

F/U w/ MD appt

Crystal Wong

4

The Hand Center of San Francisco, Inc

Kyle D Bickel, MD

Patrick O Lang, MD

Hand and Wrist Surgery

Upper Extremity Reconstruction

Microsurgery

Reconstructive Surgery

April 16, 2019

Chubb/WC Po Box 42065 Phoenix, AZ 85080

RE:

Jonathan Shockley

Employer: DOI:

Biotelemetry 06/25/2018

Claim #:

040519008736

TREATING PHYSICIAN'S PROGRESS REPORT/PR2

Dear Ladies and Gentlemen:

HISTORY OF INJURY This patient has been under my care for treatment of his bilateral upper extremity repetitive strain injury. His current occupation requires intensive sustained use of a computer and mouse. This has generated a vague bilateral upper extremity pain that has been refractory to conservative management.

PRESENT STATUS Improved.

CURRENT SUBJECTIVE COMPLAINTS The patient continues to report pain in multiple locations in the bilateral hands, wrists, and forearms. These symptoms continue to wax and wane relative to his computer use.

PHYSICAL EXAM Physical exam is entirely within normal limits. Tinel's sign in the ulnar nerve at the elbow and the median nerve at the wrist is negative bilaterally. Forearm compartments are soft and nontender bilaterally. Wrist and digital range of motion is normal, and sensation is intact distally bilaterally.

IMPRESSION/DIAGNOSIS Bilateral upper extremity repetitive strain injury.

TREATMENT RECOMMENDATIONS This patient has a clear case of repetitive strain injury affecting his bilateral upper extremities. He has made some adjustments to his ergonomic workstation and has seen some mild improvement in his symptoms. He continues to report that his pain is exacerbated by a computer use. We will maintain his work restrictions from computer use for the next six weeks. He will also continue working with his occupational hand therapist. I can see him back in six weeks for follow-up.

Patient Name Shockley, Jonathan Date of Visit 2019-04-16
Page 2 of 2

WORK STATUS Modified duty with no computer use.-

FOLLOW-UP I will see him back in six weeks for follow-up. He is approaching Permanent and Stationary status.

Please let me know if I can be of any further help.

Sincerely,

Patrick O Lang, M.D.
Cal Lie #A106890
POL/kt
ELECTRONICALLY SIGNED BY PATRICK O LANG, MD

Executed at San Francisco, CA. Date: 4/17/2019 8:59:18 AM I declare under penalty of perjury that this report is true and correct to the best of my knowledge and that I have not violated California Labor Code 139.3

The Hand Center of San Francisco, Inc

Kyle D Bickel, MD

Patrick O Lang, MD

Hand and Wrist Surgery

Upper Extremity Reconstruction

Microsurgery

Reconstructive Surgery

May 14, 2019

Mario Castro, Senior Claims Examiner Chubb Po Box 42065 Phoenix, AZ 85080

RE: Jonathan Shockley DOI: 02/15/2019

Claim#: 040519008736

Dear Mr. Castro:

I am writing regarding in response to your correspondence dated May 1, 2019.

Jonathan Shockley has been under my care for treatment of his bilateral upper extremity repetitive strain injury. His symptoms are directly related to his work as a cardiology data analyst. He spends long hours on a computer every day in the course of his normal work. He was put on temporary total disability on his initial visit March 1, 2019 until April 10, 2019. I have agreed to place him on modified duty with the restriction of no computer use until his symptoms improve from April 10, 2019 through June 1, 2019. This is not an open ended work restriction, and we will reevaluate his status when I see him back in the office in a few weeks. My hope is that he will be able to return to work with no restrictions following the next visit, as I have no additional treatment to offer him. He is continuing to work with his occupational hand therapist in the meantime.

In summary, this patient will remain on modified duty with the restriction of no computer use until the first week of June, 2019. At that point, I anticipate that he will be Permanent and Stationary status with no residual work restrictions.

Please contact my office with any additional questions.

Sincerely,

Patrick Ő Lang, M.D. CA Lic #A106890

CA Lic #A1068

POL/kt

The Hand Center of San Francisco, Inc

Kyle D Bickel, MD

Patrick O Lang, MD

Hand and Wrist Surgery

Upper Extremity Reconstruction

Microsurgery

Reconstructive Surgery

May 28, 2019

Chubb/Wc P.O. Box 42065 Phoenix, AZ 85080

RE:

Jonathan Shockley

Employer:

Biotelemetry

DOI:

06/25/2018

Claim #:

040519008736

TREATING PHYSICIAN'S PERMANENT AND STATIONARY REPORT/PR3

Dear Ladies and Gentlemen:

This patient has been under my care for treatment of his bilateral upper extremity repetitive strain injury.

HISTORY OF INJURY This patient is a 40-year-old right-hand-dominant EKG technician who was referred to my office with bilateral upper extremity pain. His symptoms arose in the setting of his work as an EKG technician. His job is a quota-based position that requires him to analyze large numbers of EKG reports on a computer monitor. This involves extensive mouse clicking in a repetitive fashion. In the course of his work, he developed a diffuse of bilateral hand and forearm pain.

TREATMENT RENDERED This has been managed conservatively with work restrictions and occupational hand therapy. In addition, he is undergone a formal ergonomics evaluation of his computer work station.

CURRENT STATUS Unchanged.

CURRENT SUBJECTIVE COMPLAINTS The patient continues to report vague bilateral hand and wrist and forearm pain. He has been off work for several weeks now but the symptoms are persistent. He reports that he was talking on the phone just a few days ago and had a significant exacerbation of his right wrist and forearm pain from simply holding a phone.

601 Van Ness Ave Suite 2018 San Francisco CA 94102 Tel: 415.751.HAND (4263) Fax: 415.359.1925 email admin@sthand.com www.sthand.com Patient Name Jonathan Shockley Date of Visit 2019-05-28 Page 2 of 2

PHYSICAL EXAM Physical exam continues to be within normal limits. Tinel's sign in the ulnar nerve at the elbow is negative bilaterally. Forearm compartments are soft and nontender to palpation bilaterally. Finkelstein's test is negative at the wrist bilaterally. Wrist range of motion and digital range of motion are normal bilaterally. Carpal tunnel compression test is negative bilaterally. Sensation is grossly intact distally bilaterally.

IMPRESSION 40-year-old man with bilateral upper extremity repetitive strain injury. I had a lengthy discussion with the patient today regarding his current status. Unfortunately, I have no additional treatment to offer him. His symptoms are classic for repetitive strain injury and are clearly related to the nature of his work as a reviewer of EKGs. This job requires very high-volume and repetitive use of a mouse and keyboard. I told him that the prognosis for these sorts of repetitive pain symptoms is highly variable. My suspicion is that the symptoms will eventually resolve. The timeline is not clear. He is emphatic about being unable to use a computer as any minor use of the computer causes flares in his symptoms. I therefore recommended that we designate him Permanent and Stationary status with the permanent work restriction of no computer use. He understands that this will likely have implications for his employment.

TREATMENT/FUTURE MEDICAL None needed.

WORK STATUS Modified duty with no use of the computer.

FOLLOW UP None needed.

Thank you again for your referral. Please let me know if I can be of any further help.

Sincerely,

Patrick O Lang, M.D.
Cal Lie # A106890
POL/kt
SIGNED ELECTRONICALLY BY PATRICK O LANG, MD

Executed at San Francisco, CA. Date: 5/29/2019 9:42:41 AM I declare under penalty of perjury that this report is true and correct to the best of my knowledge and that I have not violated California Labor Code 139.3

601 Van Ness Ave Suite 2018 San Francisco CA 94102 Tel: 415.751.HAND (4263) Fax: 415.359.1925 email admin@sthand.com www.sthand.com